



Patient Assistance Program Center



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## Patient Assistance Program Eligibility Criteria and Medicare Part D

### *Will Medicare Patients Be Eligible for your Patient Assistance Program?*

Updates are made as they are received. Last updated September 11, 2006

No Medicare Patients may apply for PAPs		
<b>American Regent</b> <b>Amgen</b> <b>Axcan</b> <b>Biogen</b> <b>Boehringer Ingelheim</b> <b>Cangene</b> <b>Celgene</b> <b>Centocor</b> (If diagnosis is for off-label use, Medicare beneficiaries may still apply.)	<b>Cephalon</b> <b>Chiron/Proleukin</b> <b>Daiichi Sankyo</b> <b>Dermik</b> <b>Genzyme</b> <b>IVAX</b> <b>MedImmune</b> <b>Millenium</b>	<b>Mylan</b> <b>Novo-Nordisk</b> <b>PKL Biopharm</b> <b>Purdue</b> <b>Savient</b> <b>Scios</b> <b>Teva/Gate</b>
Medicare Patients without a Part D plan may apply for PAPs		
<b>3M #</b> <b>Alcon</b> <b>Allergan</b> <b>Amylin</b> <b>AstraZeneca**</b> (click to read press release) <b>Astellas</b> <b>Bayer</b> <b>Berlex</b> <b>Biovail</b> <b>Bradley Pharmaceuticals</b> <b>Bristol Myer Squibb</b> <b>Chiron/Rabavert</b> <b>Chiron/TOBI #</b> <b>Duramed</b> (MC Advantage Plans are also eligible.)	<b>Eisai</b> <b>Endo</b> <b>ESP</b> <b>First Horizon</b> <b>Forest</b> <b>Galderma</b> <b>Genentech</b> <b>Gilead #</b> <b>Intermune</b> <b>Ligand #</b> <b>MedPointe</b> <b>MGI</b> <b>NABI</b> <b>NitroMed</b> <b>Ortho-Biotech #</b>	<b>Pfizer</b> <b>Reliant</b> <b>Roche #</b> <b>Sanofi-Aventis</b> <b>Serono</b> <b>Shire #</b> <b>Sigma-Tau #</b> <b>Solvay</b> <b>Takeda</b> <b>UCB</b> <b>Upsher-Smith</b> <b>Valeant #</b> <b>Vistakon</b> <b>Xcel</b>
All Medicare Patients may apply for PAPs		
<b>Abbott **</b> <b>Alpharma</b> <b>Berlex/Beta Seron Fnd.</b> (Part D enrollees cannot be eligible for LIS*) <b>Digestive Care</b> <b>Eytech</b> <b>GTx</b>	<b>Johnson &amp; Johnson**</b> (click to read press release) <b>Kos</b> <b>Merck**</b> <b>Novartis</b> <b>Procter &amp; Gamble</b> (Part D enrollees must not be eligible for LIS*)	<b>Schering-Plough</b> (All applicants must have incurred more than 3% of household income in out-of-pocket medication costs and must have LIS* denial letter) <b>TAP</b> (Prevacid only) <b>Wyeth</b> (Part D enrollees must submit a hardship letter or LIS denial letter)
Other		
<b>Baxter</b> (Medications covered through Medicare Part B.) <b>Eli Lilly**</b> (click to read press release)	<b>GlaxoSmithKline**</b> (click to read press release) <b>NORD programs</b> (read press release)	<b>Watson</b> (Medications covered through Medicare Part B. If Medicare denies payment, beneficiaries may apply for PAP.)

\*LIS - Low-Income Subsidy

\*\*Company will consider allowing some Part D enrollees to apply for PAPs; contact the company for more information.

# Part D enrollees may apply for drugs not covered by their plan.